

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

COPY

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.

Use "APPLICATION FOR PERMIT-" for such proposals

SUBMIT IN TRIPLICATE

070 FARMINGTON, NM

1. TYPE OF WELL OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>	5. LEASE DESIGNATION AND SERIAL NO. SF-078498A
2. NAME OF OPERATOR CONOCO INC.	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS AND TELEPHONE NO. 10 Desta Drive, Ste. 100W Midland, Texas 79705-4500 (915-686-5424)	7. IF UNIT OR CA, AGREEMENT DESIGNATION
4. LOCATION OF WELL (Footage, Sec., T., R., M., or Survey Description) 790' FNL - 1850' FWL SEC. 32 T28N-R07W UNIT LETTER 'C'	8. WELL NAME AND NO. San Juan 28-7 Unit #252
	9. API WELL NO. 30-039-21653
	10. FIELD AND POOL, OR EXPLORATORY AREA BLANCO M/D KAKOTA
	11. COUNTY OR PARISH, STATE RIO ARRIBA, NM

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent <input checked="" type="checkbox"/> Subsequent Report <input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Abandonment <input type="checkbox"/> Recompletion <input type="checkbox"/> Plugging Back <input type="checkbox"/> Casing Repair <input type="checkbox"/> Altering Casing <input checked="" type="checkbox"/> Other: <u>Change tubing & test casing, reperf Dakota</u>
RECEIVED DEC 1 1997 OIL CON. DIV. DIST. 3	<input type="checkbox"/> Change of Plans <input type="checkbox"/> New Construction <input type="checkbox"/> Non-Routine Fracturing <input type="checkbox"/> Water Shut-Off <input type="checkbox"/> Conversion to Injection <input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log Form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)
- 11/03/97 MIRU spot equipment.
- 11/04/97 245# csg, 0# csign, pump 5 bbls down tubing, kill well, NDWH, NUBOP, drop SV in 2-3/8" tubing, load tubing, TOOH looking for leak, found 3 pencil lead sized holes in tubing @ 1700', replaced one joint, tested string to 800# OK, reland tubing @ 6994' w/ SN on bottom, NDBOP, NUWH, RU swab fluid level in tubing to 5000', RET SV, fluid dropped to 6000', SDON.
- 11/05/97 110# csg, 0# tbq, Check FL @ 6000' in tubing, swab dry no gas up tbq, NDWH, NUBOP, TOOH w/ tbq, TIH w/ Halliburton RBP & PKR, set RBP @ 6646' (182 above top DK perf) PU 1 jt set PKR test plug to 1000# OK, REL PKR test casing from 6646' to surface 500# OK, RU swab, swab casing down to 5000', SDON.
- 11/06/97 Continue swabbing, swab FL to 6200', release RBP & TOOH, RU wireline, reperforate DK zone w/ 13 holes @ 6828', 34, 40, 46, 6920, 47, 53, 59, 79, 86, 99, 7018, 7042', RD wireline, SDON
- 11/07/97 TIH w/ Halliburton PPI treating PKR w/ 2' spacing, RU BJ acid pump truck, test treat line to 3500# ok, set PKR in blank pipe drop SV, test tubing & PKR to 2500# ok, Rel PKR, spot acid to end of tbq, PU & set across each perforation in 12 sets, BD each perf w/ 1 bbl 15% Hcl @ 2.2 BPM, 250# max, RD BJ, Ret SV from PKR, TOOH w/ tools, TIH w/ 2-3/8" SN & tbq to 6995', RU to swab, fluid level @ 5500', made 4 runs recovered 12 bbls, SDON.
- 11/10/97 Casing 375#, tbq 100#, flowed tubing to rig pit 30 min died, RIH w/ swab tag fluid level @ 5800', swab to 6600', slight gas flow up tubing, casing dropped to 325#, wait 30 min swab back another 1/2 to 3/4 bbl fluid each run, recovered 15 bbls total today, SDON.
- 11/11/97 360# csg, 80#, flow tbq to rig pit died in 30 min, RIH w/ swab initial fluid level @ 5800', made 1 swab run kicked off well flow thru 1/2" choke flowed 1 hr died, cont swabbing recovered 6 bbls total fluid, ND swab lubricator, NDBOP, NUWH, RDMO.

14. I hereby certify that the foregoing is true and correct

SIGNED

Debra Bemenderfer

DEBRA BEMENDERFER

TITLE As Agent for Conoco Inc.

DATE 11-19-97

(This space for Federal or State office use)

APPROVED BY

Conditions of approval, if any:

TITLE

DATE

FARMINGTON DISTRICT OFFICE

NIJOCD